

**LOCAL ENFORCEMENT AGENCY GRANT APPLICATION**

**July 1, 2005 to June 30, 2006**

**EA16 Grant Cycle**

Local Enforcement Agency (LEA) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name & Title of Program Director \_\_\_\_\_

Phone \_\_\_\_\_ e-mail \_\_\_\_\_

Name of Finance Officer \_\_\_\_\_

Phone \_\_\_\_\_ e-mail \_\_\_\_\_

Name of Program Manager \_\_\_\_\_

Phone \_\_\_\_\_ e-mail \_\_\_\_\_

FAX \_\_\_\_\_

Primary Contact Person \_\_\_\_\_

This application must be accompanied by the following:

1. A Statement of Use describing the program's goals or objectives and stating how the grant funds will be used to improve the LEA's solid waste facilities permit and inspection program.
2. A Resolution from the local governing body that designates the position title of the person authorized to execute all grant-related documents for your jurisdiction. The signature of the authorized person is the signature that will be accepted on grant-related documents. A Resolution for a regional LEA must list all participating jurisdictions and be accompanied by a letter of authorization from each participating jurisdiction.
3. Environmental Justice Certification: Authorized signator must initial below.

*Certification:*

*I declare, under penalty of perjury, that all information submitted for the CIWMB's consideration for the award of grant funds is true and accurate to the best of my knowledge and belief.*

*Printed Name of Authorized Person* \_\_\_\_\_

*Title (authorized in resolution)* \_\_\_\_\_

*Phone* \_\_\_\_\_ *e-mail* \_\_\_\_\_

*Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

**ENVIRONMENTAL JUSTICE**

\_\_\_\_\_ *Applicant certifies that, if awarded a grant, applicant shall, in the performance of the grant agreement, conduct its programs, policies and activities that substantially affect human health or the environment in a manner that ensures the fair treatment of people of all races, cultures, and income levels, including minority populations and low income populations of the State. (Authorized signator please initial)*